

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.  | DATE     |
|---------------------------|----------|---------|----------|
| FEE DETERMINATION         |          |         |          |
| O.I.P.E. CLASSIFIER       |          | 48      | 1/30/01  |
| FORMALITY REVIEW          |          |         |          |
| RESPONSE FORMALITY REVIEW | MM       | JCH/920 | 02-14-01 |
|                           | 2.03     | 809     | 6-15-01  |
|                           |          | 1028    | 07/13/01 |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here

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